

Dr. O'Connor, closing discussion: I have had reports from a number of men who have been trying the operation, and their results have been inconsistent and not as good as mine. I wish to read an extract from a letter from Dr. Chance of Philadelphia:

"Such cases as I have seen in which no deviation took place from your express directions have produced satisfactory results, a satisfaction perhaps equal to that following more complicated methods. I personally regard yours as simpler than those in which threaded tucks are made. I have seen all sorts of deviations and although the cases are presented as the results of 'O'Connor Operation' they cannot justly be so classed."

I read this to show that there may be possible causes for some of the unsatisfactory results outside of the operation itself.

PRESIDENT'S ADDRESS BEFORE THE
SIXTEENTH ANNUAL MEETING OF
THE AMERICAN THERAPEUTIC SO-
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SOME OBSERVATIONS ON THE PRESENT STATUS OF
AMERICAN MEDICAL JOURNALISM.

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The importance of an effective American medical journalism which shall stimulate the best effort of our own American profession and afford an opportunity for recording our own best thought, and, at the same time, keep before our profession the advances that are being made in the entire medical world, cannot be overestimated. The strength of our profession and the progress it shall make depend largely upon its literature. While our American profession is young and not yet established upon the stable conservative basis of our European confreres, yet it has much to be proud of. The pages of medical history bear the imprint of many men from this side of the Atlantic; and at no time has our profession been so active as now. The fact that we are not conservatively settled is to our advantage, rather than disadvantage. While we may envy the comfortable, honorable position occupied by our confreres in Europe, and envy the position which they have established for themselves through centuries of toil and service, yet we must not be unmindful of the fact that our very freedom, the fact that we are comparatively unbound by tradition and that we are in the making as a scientific profession is to our advantage.

During recent years our profession has been undergoing important changes. It has been demanding higher standards of scholarship and stricter requirements of its members. The public at large has put us on trial to prove that we are worthy of and able to hold its confidence. With the high standards of efficiency that we have set for ourselves, and the demands which are being made upon us by the public, our profession needs have no fear. Its future is secure. When one reviews the genuine advances which the past twenty-five years have added to our scientific knowledge, he is forced to recognize that our science today is as different from medicine of the seventies and eighties of the last century as the adult is from the child. Fortu-

nately for those of our profession who live to-day they are engaged in the study of medicine at the time of its greatest development. The accomplishments of to-day, however, are based on the knowledge of the past and workers must not be unmindful of what has been done by the pioneers of previous centuries; but with the glorious heritage coming to us from our faithful predecessors, it is our privilege, as well as our duty, to gradually and systematically build a structure of scientific medicine where every stone used in the building has been subjected to tests which have been proven by many careful independent workers.

American medical journalism records the events which lead up to and take place during the building of America's scientific medicine. Therefore it must be accurate, complete and efficient in that it keeps every group of workers in touch with what is being done by every other group.

Any one who has had editorial experience realizes his limitations in attempting to pass upon the merits of papers which are submitted to him, covering as they do all branches of medicine. Many papers add nothing new to the discussions of known scientific facts, nor do they add new observations; and medical literature would be just as rich without them. There are others, however, which may contain important facts and yet they may not appeal to the editor, and be rejected.

Medical journals are not wholly for the original investigator. They are for the purpose of bringing the work of the original investigator to the members of the profession at large; for establishing truth and rejecting error; and, for discussing and making plain the application of facts. It is only by constant repetition that we learn. We read a scientific article and obtain a certain number of facts and a certain amount of stimulation from it. Later we read it again, and later still again, and each time wonder why we overlooked so much truth in our previous readings. So discussions are as necessary a part of medical literature as the reporting of the original facts. By recording his own thoughts and experiences even without adding new facts one is helping others to understand principles which would otherwise escape them. How far medical journals can allow free expression of opinion without appearing to foster error is open to question. The editor's position is a difficult one. He is supposed to be able to differentiate the good from the bad and yet he is only able to see things from his own standpoint. If he rejects good work the author is discouraged; on the other hand, if he lets a bad article appear, readers may be led into error.

American medical journalism to-day is in a very unsatisfactory condition. It is in a state of transition. A few years ago the self-respecting members of our profession began to take stock and found that they were in a deplorable state as far as medical education and medical journalism were concerned; medical schools were largely private concerns depending on tuition of students for maintenance; and, there being no set standards, preliminary training and scholarship were of little concern compared with the fact that the students

matriculated and met the momentary requirements of the school. From this chaotic state has emerged in the short space of twenty years a strong medical curriculum based on a preliminary training, and a demand upon schools for equipment which has forced them into large universities. So, to-day medical education in the United States is fast becoming not only an honor to our profession but an honor to the state.

A few years ago we had a number of independent medical journals—journals which were published largely by medical book publishers. These journals had been established for two purposes: one, the encouragement of medical writing, and the other the furtherance of the interests of the publishers. The purpose of these journals was not questioned, neither was their value to the profession doubted until a comparatively recent date. The spirit of commercialism which has been so rampant in all industries gradually assumed greater and greater force in our medical journals. Realizing the value of journals as mediums of publicity, manufacturing concerns which presumably served only the interests of medical men, gradually gained complete control over medical publications. This they did largely through the advertising pages. It is not necessary to doubt the honesty of all commercial houses, for many of them were honest in their efforts to serve the profession and the public, and were willing to take as their reward the legitimate profit from the sale of their products. Others, however, were less scrupulous and resorted to undignified and questionable methods.

The acts of certain commercial drug houses became especially obnoxious. Page on page of advertisements could be found in nearly every journal exalting the claims of some special preparation, and teaching false therapeutics at so much per line. This was followed up by smooth tongued detail men who entered the office of the physician and, with an assumed superior knowledge, presumed to argue with him as to the merits and demerits of certain therapeutic measures. Even the medical profession at last became aroused to the extent of the insult.

American medicine, while no less interested in the fundamental principles of our science, has always aimed at improving its therapeutic measures. This is the principle upon which the American Therapeutic Society is based. Therapeutic nihilism is neither acceptable to the American public nor the American profession. Our profession refuses to occupy the position as coroner to the public and to recognize that its chief role is to determine the cause of death. Its aim is to alleviate suffering and apply curative measures. If it cannot do this it has no claim to the confidence of the public except in its efforts to prevent disease. In its effort to teach therapeutics it needs and must have an efficient, independent journalism.

The selling of advertising space, while legitimate, has a tendency to lower dignity and might even influence the selection of papers and the character of the journals. There can be little real improvement, until there is a general understanding of the functions of medical journals; until it is recognized

that they are media for the education of the medical profession and not for supplying it with questionable information or earning money. Needless to say, however, every respectable journal should have earning capacity sufficient to pay all expenses of conducting it on a high plane.

We have at the present time too many medical journals, such as they are, but entirely too few that can be considered as worthy of our profession. They may be classed under the following heads: The privately-owned journal conducted for profit primarily and medical education secondarily; the privately-owned journal conducted from altruistic motives; the journal which is the organ of some society and whose purpose is the furthering of the interests of that society primarily and medical education secondarily; the organ of some medical institution whose primary purpose is to publish the work done in that institution, together with other papers along similar lines; and the purely scientific journal, representing no particular set of workers and depending on the support of scientific workers in general for its success. All of these journals may be good journals and do untold good for medicine. Some of them are largely dependent upon advertising, while others are wholly free from its influence. Under existing conditions the question of whether or not a journal of a certain type can be successfully published or not is not a question of whether such a journal is needed, but can it draw sufficient advertisements to make its publication a monetary success?

It is a self-evident fact that paid advertisements occupy too important a place in medical journalism. Can it be that a great profession like ours cannot place its new discoveries and its general scientific discussions before its members except through the profit from advertising space? If such is the case then it is all important that such advertisements be carefully scrutinized so that none that are unworthy appear.

The work that is being carried on by the American Medical Association in the interest of clean advertisements is commendable. But alas! How few other journals follow its lead! How many can afford to do so from the financial standpoint as long as advertisers must pay for our privilege of obtaining medical facts? If we view ourselves in the true light we are in the following plight: We obtain our scientific medical facts through our journals simply because commercial houses see fit to drop their contributions into the basket. We will no longer smile upon privately owned medical schools because we desire to breathe the pure air of freedom and efficiency; but after we have had our college training we send solicitors to beg private concerns to contribute to the advertising columns of our journals so that we may have the privilege of continuing our education. The result of this is that while the parent journal, the Journal of the American Medical Association, has sufficient patronage from clean, censored advertisements to make it self-sustaining, many of its own children, the journals of the state associations, to a large degree, still serve their readers by paid advertisements from uncensored

products. While the parent is able to feed its readers on certified milk, the children are compelled to serve their readers not only with uncertified, but unpasteurized milk; milk uncontrolled in every stage of its production.

What is the remedy? Far be it from me to offer an easy way out of this difficulty. But it seems certain that no definite headway can be made in the final establishment of an efficient scientific medical journalism until a maintenance independent of advertisements is provided. This may be too far in the future for present-day consideration, but it is logical.

The first step in that direction is to recognize that there is a difference between journals for organization and journals for teaching scientific medicine. The second step is to divorce scientific journals from their dependence on advertisers and make them self sustaining, either through an adequate subscription price or through endowments. Science should be separated from business.

I do not wish to be understood as criticizing individual journals as they now exist or have existed in the past, but I desire to point out the need, as I see it, for relieving our present unsatisfactory state of affairs. The Journal of the American Medical Association and the journals of many of our state associations are a credit to the profession and are doing good work in both organization and teaching of scientific medicine; but no one can give more than a passing glance to the situation without seeing that our American profession cannot be dependent upon these for their scientific education. These journals are, and should be, partly scientific in their nature but they can never fully serve the needs of the American profession in scientific medicine; for their first function is to promote organization and improve the condition of medical men as a body. We need these journals for organization; but, aside from them, we need both general and special journals of national circulation and national interest, which, as they come to our table, will be representative of the best scientific work that is being done in all sections of the country. No one journal can do this, for the acquaintanceship and influence of every editor or editorial board is more or less circumscribed; but the field should be so well covered that, by taking several journals, the subscribers can keep abreast of the present state of medical science.

These journals should be different in their scope, as they are bound to be from the fact that they are edited by different men and controlled by different influences. Some should be ultra-scientific; others should lead more to general discussions. There is need for both. We also need journals such as are commonly found on the Continent in which a complete discussion of disputed subjects is printed. America heretofore has largely demanded practical papers; but, as our profession grows older, it finds that, as there can be no cream without milk, so practical subjects have facts no less important underlying them.

The philosophical discussion of medical subjects, the bringing of anatomy, physiology, bacteriology

and pathology into constant close relationship with clinical medicine, is necessary if we desire to grow as a profession. This should be encouraged more and more in this country. The short practical paper must be supplemented by complete fundamental discussions. It cannot be done unless we have journals which will encourage the writing of such papers. Monographs are the best part of Continental medical literature, and their development in our country would be encouraged if we had journals which would publish papers of length. There is a great gap in our medical literature between the text-book, which, while necessary as a guide, is too impersonal, too inelastic, too incomplete, and too conservative to be more than a guide; and the practical papers which appear in the average journal, telling a supposed fact or experience, free from all scientific discussion. This gap can be filled by monographs, and journals whose pages are open to such papers are needed in all branches of medicine.

By linking scientific medicine so closely to medical organization we have appeared to make it subsidiary and in this manner have brought it under unjust criticism. The triumph of scientific medicine has been minimized because of opposition to organization and the science itself has been put on the defensive. The two should be divorced and scientific medicine should become a positive aggressive factor and take its place, against all opposition, in the front ranks of the world's mighty forces for good. It may be retarded, its influence may be curtailed for a time, but it will eventually come into its own regardless of opposition.

THE DIAGNOSIS OF CONGENITAL SYPHILIS.*

By H. H. YERINGTON, M.D., San Francisco.

Since the diagnostic tests of Wassermann and Noguchi have been brought forward, followed by the treatment of syphilis by the newer therapy, a renewed interest has been taken in this disease which has been almost a precedent in the history of medicine.

I shall endeavor in this paper to review briefly a few points which have been brought out by various writers, and also discuss various points which I have observed during the past four years in the treatment and diagnosis of congenital syphilis.

In reviewing cases I have referred freely to a very careful review on hereditary syphilis made by Harvey Parker Towle in the April and July numbers of the *American Journal of Diseases of Children* of last year, along with other articles.

First, there are many phases of the serum tests which are interesting. Field reports 12 cases of lead poisoning in which there were eight positive Wassermanns. DeBuys reports two children with negative Wassermanns, notwithstanding all four parents had positive tests. In another case, one mother and one twin had negative sera, but the other twin was positive. In some work done in

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